United Nations E/ICEF/1999/P/L.29

Economic and Social Council

Distr.: Limited
30 June 1999

Original: English

United Nations Children's Fund
Executive Board
Second regular session 1999
7–10 September 1999
Item 9 of the provisional agenda*

For action

Recommendation for funding for a short-duration multi-country programme**

Multi-country programme for Central and Eastern Europe, the Commonwealth of Independent States and the Baltic States

Summary

The present document contains a recommendation for funding from general resources and supplementary funds for a multi-country programme for Central and Eastern Europe, the Commonwealth of Independent States and the Baltic States. It covers Belarus, Bulgaria, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, the Russian Federation, Slovakia and Ukraine. Croatia will be included from year 2001 on completion of its current country programme. The Executive Director *recommends* that the Executive Board approve the amount of $7,000,000 from general resources, subject to the availability of funds, and $6,000,000 in supplementary funds, subject to the availability of specific-purpose contributions, for the period 2000 to 2001.

* E/ICEF/1999/15

** The figures provided in the present document are final and take into account unspent balances of programme cooperation at the end of 1998. They will be contained in the "Summary of 1999 recommendations for general resources and supplementary funding programmes" (E/ICEF/1999/P/L.16).

99-19669 (E) 080799

Introduction

1. The present programme recommendation outlines UNICEF support for the rights and specific priority needs of children and women, in the context of the medium-term plan for the period 1998–2001 (E/ICEF/1998/13 and Corr.1), in these 12 countries. It is based on ongoing country-level analyses of the status of children and women; consultations with national partners, United Nations and bilateral agencies, and the World Bank; national and international non-governmental organizations (NGOs); and on-the-ground experience. It also utilizes analysis of social conditions and trends from the recent reports on Monitoring of Eastern Europe (MONEE) and on the database of the International Child Development Centre (ICDC) in Florence, Italy, which depends on information coming from the countries themselves. Other United Nations reports, such as the Concluding Recommendations of the Committee on the Rights of the Child and the *Human Development Report* of the United Nations Development Programme (UNDP) were also utilized.

2. Children and women in these countries continue to be adversely affected by the economic and political transitional processes of the early 1990s, although the magnitude and impact on children varies greatly among the countries. Many of the common problems affecting children arise from shared policies prior to the transition. For example, State policy provided institutional public care for orphans, children with disabilities and children in families unable to provide for their care. An estimated 500,000 children still languish in such centres, denied a family life. Government benefits covering education, health care and an extensive network of social assistance providing a basic standard of living for most citizens have been dramatically reduced. This has resulted in growing disparity and significant numbers of the population in poverty or in at-risk situations. While many of the goals set forth at the World Summit for Children, such as reducing under-five mortality, have been achieved and show continued improvement, addressing rights of children and young people who face poverty and exclusion are among the new challenges facing Governments and civil society.

3. Therefore, a common programme framework based on the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women, both of which have been ratified by all the countries, has been developed for the 12 countries which includes: (a) early childhood care and development (ECCD); (b) children in need of special protection; (c) young people's health and development; and (d) social mobilization for child rights. Programme strategies emphasize advocacy and capacity-development for policy reforms, and for civil society, local government and young people's participation towards the realization of goals for children. During the course of the 2000–2001 biennium, UNICEF will initiate a consultative process with partners that takes into account the Executive Board decision regarding the allocation of general resources to countries that have reached the gross national product per capita and under-five mortality rate threshold with the objective of mobilizing additional local resources to meet the needs of children and phasing down of UNICEF direct investments.

4. Specific differences are found, however, among the 12 countries which is reflected by variations in implementation processes and activities. In Bulgaria, Croatia, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland and Slovakia, with a combined population of around 87 million, the vision for the future includes close linkages with European institutions and, in a number of cases, with aspirations of joining the European Union. A vast array of civil society organizations have begun to address many of the social needs, complementing government initiatives. A flexible programming framework, targeting priority concerns affecting children both in the individual countries and especially in country clusters, has emerged as an effective operational approach. For example, theme-related multi-country activities included the development of a database of children in public care, the introduction of the Convention on the Rights of the Child in schools, and a multi-country study on children living in border areas which also considers cross-border trafficking of children. In eight of the countries, National Committees for UNICEF continue to support UNICEF global efforts as well as provide strategic advocacy for children's and women's rights in their countries.

5. Belarus, the Russian Federation and Ukraine have an estimated population of 207 million. Many of the positive gains made during the initial years of transition have been deleteriously affected by economic setbacks, most recently in August 1998. Civil society organizations have not yet emerged as strong partners to support the State in providing the level and types of services of the previous era. The planning and implementation of programmes and services based on principles of individual human rights are likewise slowly emerging. New models of social services, which are accepted as appropriate to the country and local situation, need to be adapted and evaluated before they can be replicated. UNICEF cooperation has responded to a common set of approaches, such as partnerships with local government for addressing the needs of at-risk young people, and community-based alternatives for the institutional care

of children. The establishment of three field offices, with a small core staff, supports the planning and implementation of initiatives towards longer-term policy reforms required to more comprehensively address children's rights.

The situation of children and women

6. Economic production in the majority of these countries continues to be below 1989 levels, resulting in poverty rates that affect a significant number of households. While the Russian Federation showed signs of recovery in 1997, this was severely affected by the 1998 financial crisis, which also had a serious impact in Belarus and Ukraine, and in varying degrees, in several of the other countries. In the Russian Federation, based on a 1999 report of the State Statistical Committee, 27 per cent of the population were living below the minimum subsistence level in 1998, increasing to 37 per cent, or 55.2 million persons, in 1999. In Latvia, a 1998 study indicated that 67 per cent of households lived below the established crises subsistence minimum level of income. Among those hardest hit in these countries are families with more than one child, young people, pensioners and, in many of the countries, *Roma* (gypsy) and other minority populations. Coping mechanisms of families vary and may include the delay of health and dental visits; reduced expenditures on food, clothing and other necessities; increased use of savings and sale of assets; and greater dependence on limited state assistance.

7. In spite of strains on health-care delivery, infant, child and maternal mortality rates are generally low and continue to decline. Immunization coverage is over 90 per cent. No polio cases have been reported in recent years. The prevalence of iodine deficiency disorders (IDD) varies from moderate severity in parts of Belarus, the Russian Federation and Ukraine to virtual elimination in Bulgaria, the Czech Republic, Poland and Slovakia, subject to evaluation. In the other countries, prospects for the elimination of IDD are good. There is an overall decline in fertility levels. Exclusive breastfeeding rates have increased somewhat in recent years, particularly associated with the introduction of the Baby-Friendly Hospital Initiative (BFHI), although it is still not considered common practice. Formal pre-school services benefit only around 50 per cent of young children, with large numbers of the most vulnerable communities and households underserved.

8. Although the Chernobyl nuclear accident has long since faded from world attention, it still affects the lives of families and over 3 million children in parts of Belarus, the Russian Federation and Ukraine. There is extensive data which points to a steady increase in the incidence of thyroid cancer among children and growing evidence of other related illnesses, including leukemia and other blood disorders, immune system disorders and congenital development abnormalities in exposed families. Significant psychological health disorders are likewise reported. While many agencies have been involved in efforts to rehabilitate the area, little has been done to focus on the strengthening of maternal and child health (MCH) services in the affected communities.

9. In 1997, over 500,000 children resided in public care institutions, a steady rise during recent years in several of the countries. This included "social orphans", who are generally children of impoverished families and those with disabilities. The living conditions in many of these institutions are extreme in their lack of a family environment, personal care and attention. Few efforts are made to prepare older children for the transition from life in an institution to an open society. A 1996 study by the Office of the General Prosecutor in the Russian Federation found that one in three graduates from institutions becomes homeless, one in five ends up with a criminal record and one in 10 ends up committing suicide. For children with disabilities remaining with families, access to qualified health and rehabilitative care, specialized education and community life are limited. Foster care programmes, mainstreaming of children with disabilities and other community-based efforts have been introduced in the countries on a small scale, but require strengthening and popularization, complemented by improved preventive services.

10. While basic education school net enrolments are generally high at over 90 per cent, attendance rates are reported to be far lower. Around 4.5 million young people aged 15–18 years are not attending school or the higher education programmes available. Unemployment among young people is high, generally double national averages. Substance abuse, including intravenous drug use; sexually transmitted diseases (STDs) and HIV/AIDS, and teenage pregnancy are on the rise in most of the countries. Accidents, injuries and violence affect twice the number of children and young people as compared to neighbouring European Union countries. The trafficking of children and women, children in conflict with the law including crimes against children such as domestic violence and prostitution, and children living on the streets of larger cities are on the increase. In most of the countries, national legislation and services based on the principles of the Convention on the Rights of the Child in the area of juvenile justice have not yet been

reviewed and revised nor have the related professionals been trained to better handle juvenile cases.

11. Each country has some minority populations which are especially vulnerable to the difficulties of transition. For example, the poor socio-economic status of the *Roma* population, estimated at over 2 million, has been noted with concern in the Concluding Remarks of the Committee on the Rights of the Child for Bulgaria, the Czech Republic, Hungary and Poland. The communities are characterized by low basic education completion rates and secondary school enrolment, low literacy, high unemployment, extreme poverty and poor living standards. A disproportionate number of children are in public care. While protective legislation and a range of special efforts, such as minority self-government and scholarships for children, are in place in some of the countries, these are not fully adequate to redress long-standing societal imbalances. A number of *Roma* organizations have emerged, pressing for improved respect of human rights.

12. The economic and social changes in the society have made life particularly difficult for women. Since 1989, women have lost millions of jobs in the formal sector. In more recent years, this trend continues, while access to unemployment compensation remains poor or is even shrinking. Work in the informal economy has greatly increased, adding further burdens on women and often involving unhealthy work conditions and no access to social security benefits or child-care services. The MONEE database shows that enrolment rates in nurseries (for children up to the age of 2 years) have fallen across the region — most rapidly in the countries of the Baltic region and western Commonwealth of Independent States (CIS) — and nurseries have practically ceased to exist in the Czech Republic and Slovakia. Meanwhile, falling fertility rates have reduced populations of young children by 10–50 per cent in the region. In many countries, fertility is now at extremely low levels in absolute terms, and if this trend continues, it will have significant social, demographic and economic repercussions. Because of rising divorce rates, increased adult male mortality and more children born out of wedlock, the share of children living in single-parent households has increased. While current data are limited, anaemia among women, as well as the continued use of abortion as a family planning method, are considered to be serious health concerns in several of the countries. As noted earlier, the two Conventions have been ratified by all countries, with different degrees of action to review and adjust national legislation and practice in line with their provisions.

Programme cooperation, 1998–1999

13. Previous UNICEF cooperation included both country-specific and cross-country interventions. For example, UNICEF provided vaccine requirements and supported the strengthening of MCH services in three districts in Bulgaria. Assistance to mayors for the development of over 60 city plans for children in Poland was provided. In each country, specific activities were under way to expand BFHI, with a total of around 100 hospitals currently certified in 11 of the countries.

14. However, the majority of activities addressed issues common to clusters of countries. In the Baltic States, initial efforts were supported to revise legislation on juvenile justice. Workshops in Geneva, Riga and Sofia on the Convention on the Rights of the Child provided positive experience exchange among the 11 participating countries. This led to specific actions, such as the inclusion of the Convention in school curricula in the Baltic States and Poland and establishment of ombudsmen offices for child rights in five regions of the Russian Federation. A multi-country database on institutional child care and best practices in support of policy reforms involved Bulgaria, Hungary, Lithuania, Poland and Slovakia. The training of journalists in Bulgaria and Slovakia, the production of a media kit, and film co-productions with media of Bulgaria, the Czech Republic, Latvia and Lithuania on child rights stimulated national media interest on the rights of children.

15. The collection, analysis and use of data for improved national planning included situation analysis reports for the Czech Republic, Hungary, Latvia, Lithuania and Slovakia; a regional study on accidents and injuries; and a study of out-of-school youth conducted in the Baltic States and Bulgaria. UNICEF supported the publication of two MONEE reports: one on the theme of education provided new and useful information for planners; and the second, which features the status of women, is scheduled for release in September 1999. The experience of country programming in Belarus, the Russian Federation and Ukraine and UNICEF-supported studies in Lithuania and Poland forms the basis of a multi-country inter-agency initiative on young people's health and HIV/AIDS with the World Health Organization (WHO) and the Joint and co-sponsored United Nations Programme on HIV/AIDS (UNAIDS). Joint missions have been completed in Bulgaria, Estonia, Latvia and Slovakia, with the Czech Republic and Hungary to be visited later in 1999. This joint endeavour will contribute to national strategy development for the protection of adolescents and will identify agency-specific priorities and country-level partnerships for follow-up action. Assessments

of national efforts in the region on BFHI and the control of IDD resulted in further programmatic actions.

16. Since the establishment of a UNICEF presence in Belarus, the Russian Federation and Ukraine in early 1997, cooperation has focused on selected geographic locations and on selected priority issues affecting children and women in order to gain experience for potential replication. Efforts in young people's health and development have centred on developing mechanisms for bringing youth, local officials and communities together to identify, discuss and develop responses to the serious priority concerns of young people such as HIV/AIDS in Kaliningrad (the Russian Federation) and Kyiv (formerly Kiev) (Ukraine). In Minsk (Belarus), local authorities have established young people's clubs where young people have access to peer counsellors and information. In Belarus, the Russian Federation and Ukraine, collaboration relating to children in need of special protection has stressed laying a foundation for action through information-gathering, raising awareness on the situation of at-risk groups and building a strategic consensus with counterparts on appropriate programmatic approaches. A study on the situation of children living in State centres for the disabled in the Russian Federation provides key strategic approaches for community rehabilitation and mainstreaming of children in regular schools.

17. The ECCD programme had two areas of focus: the first was the elimination of IDD, which was supported through the provision of equipment for iodization for all salt producers in the three countries towards the goal of universal salt iodization (USI); and the second was the promotion of exclusive breastfeeding. Beginning in 1996 with BFHI, currently eight hospitals are certified in the Russian Federation and four in Belarus. Initial reports from the Volgograd region and the city of Elektrostal have shown over 35 per cent increases in breastfeeding rates for infants up to three months old since the introduction of BFHI and improvements in the health of the newborn. Key areas of emphasis within the context of the promotion of children's rights have included reviews of legislation dealing with child protection and the establishment of child rights ombudsmen in five regions of the Russian Federation, with technical support provided by UNICEF.

18. In Belarus, the Russian Federation and Ukraine, UNICEF established strong cooperation with UNDP, which has offices in the three countries, and other United Nations agencies. This included cooperation with UNDP on the provision of preventive social support for at-risk children in St. Petersburg; with the Office of the United Nations High Commissioner for Refugees (UNHCR) on assistance for children and women in North Caucasus; with the United Nations Population Fund (UNFPA), UNAIDS and the World Bank on projects related to young people's health; and the United Nations Educational, Scientific and Cultural Organization (UNESCO) on the evaluation of Education for All Year 2000. Ongoing contacts with local and international NGOs were undertaken as part of programme planning. In the nine countries, UNICEF worked in partnership with national statistics agencies, government departments, specialized institutes, National Committees and NGOs. UNICEF also cooperated closely with WHO/UNAIDS, particularly in the area of young people's health and development. UNDP, which has offices in Bulgaria, Estonia, Latvia, Lithuania and Poland, advised on local partners and provided expertise for project formulation and implementation.

Lessons learned

19. The Convention on the Rights of the Child provides a strong programme and advocacy framework for national cooperation in the 12 countries. Among the nine countries, the Convention provided an enabling environment for intercountry action on child-trafficking and children in public care, and this will be extended to other areas of common concern such as HIV/AIDS, justice and rights of minorities. Capacity-building initiatives through exchange of experience, technical support, and data collection and analysis as reflected in the MONEE report series, have demonstrated practical and effective measures to enhance national planning for children. The National Committees facilitated UNICEF collaboration in many of the countries. For programme implementation, additional partnerships need to be pursued with a wide range of national partners, United Nations agencies, and especially programmes associated with the European Union to which several of these countries seek admission. Ensuring a national sustainable mechanism in Government as well as in the dynamic civil society for children's and women's rights remains a priority. Flexibility in programme cooperation based on the needs and opportunities in each country will continue to be required to sustain the high achievements related to the global goals for children and to ensure that the specific needs of vulnerable and at-risk groups are increasingly addressed.

20. In Belarus, the Russian Federation and Ukraine, the lessons learned from the initial programme experience include the need to: (a) systematically evaluate the impact of project activities to facilitate the replication of project experience and its use as part of advocacy for policy change; (b) develop explicit strategies for ensuring the sustainability

of programme activities; (c) find an appropriate strategic balance between practical work on the ground, on the one hand, and broader advocacy/social mobilization efforts, on the other; and (d) strengthen existing national capacity to promote children's rights. The establishment of a country presence in Belarus, the Russian Federation and Ukraine, under the Regional Office leadership and programmatic and operational guidance of the Special Representative, facilitated programme planning and monitoring, and provided the necessary on-the-spot support for the implementation of innovative demonstration projects.

Programme preparation process

21. The programme preparation process was undertaken through consultations with national counterparts collaborating with UNICEF in Bulgaria, Croatia, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland and Slovakia. It culminated in a detailed briefing by the Regional Office on the programme framework with representatives of the Permanent Missions to the United Nations of these countries. In the case of Belarus, the Russian Federation and Ukraine, two strategy planning meetings provided the opportunity to reach consensus on foundations for the proposed 2000–2001 programme. Three Cooperation Frameworks, one for each country, were prepared and submitted to the Ministry of Labour and Social Protection in Moscow, the Ministry of Family and Youth in Kyiv and the Ministries of Foreign Affairs, Education, Health and Social Protection in Minsk. The respective Governments responded positively, confirming that UNICEF cooperation was in line with their priorities. The documentation was shared with NGOs, United Nations agencies and other partners in each country.

Programme objectives and strategies

22. Within the framework of the guiding tenets of the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against

Recommended programme cooperation, 2000–2001

Estimated annual expenditure

(In thousands of United States dollars)

	2000	*2001*	*Total*
General resources			
Early childhood care and development	730	730	1 460
Children in need of special protection	610	610	1 220
Young people's health and development	1 100	1 100	2 200
Social mobilization for child rights	860	860	1 720
Cross-sectoral costs	200	200	400
Subtotal	**3 500**	**3 500**	**7 000**
Supplementary funding			
Early childhood care and development	700	700	1 400
Children in need of special protection	1 100	1 100	2 200
Young people's health and development	1 200	1 200	2 400
Subtotal	**3 000**	**3 000**	**6 000**
Total	**6 500**	**6 500**	**13 000**

Women and, in view of the prevailing situation of women and children and the common programme framework, UNICEF will continue to concentrate its efforts on capacity-building and advocacy through experience exchange, research and action research in priority areas, sharing of best practices, networking, training and mobilization of civil society. Local governance systems will be strengthened to more effectively address priority issues for children's rights and to provide opportunities for the participation of young people and civil society organizations. Advocacy will continue to be a strong programme component for raising awareness of the two Conventions, including enhanced monitoring systems. Building new partnerships and alliances for children, while strengthening those already working effectively for children's rights and fostering coordinated action for children among government, academia, NGOs, media, other donors and United Nations agencies, will receive priority attention. A gender-specific approach will be fostered in all programme activities. In addition, advocacy activities will draw attention to the need for legislative reform that would ultimately result in the prioritization of human and financial resources in favour of those most at risk. Contingency planning and support for emergencies that may arise during the programme cycle will be incorporated within the programme framework.

23. The multi-country programme of cooperation aims to strengthen national policies, programmes and monitoring systems within the framework of both the Convention on the Rights of the Child and the common programme framework for the 12 countries. The programme will lead to: (a) increased public understanding and participation, including that of children and young people, in the implementation and monitoring of the Convention; (b) improved caring practices for children and mothers through government and NGO support services; (c) young people who are better informed about healthy lifestyles and HIV/AIDS prevention; (d) accelerated efforts to prevent children entering public care and the juvenile justice system, reduce the period of stay and, where needed, improve the quality of care; (e) the prevention of crimes against children, including child exploitation, abuse and prostitution; trafficking of children and women; domestic violence and abuse; and enhanced protection for such affected children; and (f) increased participation by families of minority and other at-risk groups (e.g. communities affected by Chernobyl) in basic services and programmes for children and women.

Early childhood care and development

24. The specific needs of young children will be addressed through a range of cross-cutting activities. Advocacy for legislation and maternal health care systems that promote breastfeeding, including BFHI, will centre on consolidating training programmes for health-care practitioners, strengthening National Breast-Feeding Committees (NBFCs) and other local groups, and advocating for supportive legislation on the International Code on Marketing of Breast Milk Substitutes. Promotion of the Better Parenting Initiative (BPI) will be supported through mass media and selective training of caregivers aiming to enhance capacities of at-risk families in selected areas. This will be complemented by efforts to review and advocate for critical early childhood development services for *Roma* children.

25. UNICEF will provide technical and financial support in enhancing national capacities to eliminate IDD and ensure basic child health care based on country-specific needs. In Belarus, the Russian Federation and Ukraine in particular, UNICEF will provide short-term support for major salt manufacturers to ensure the production of iodized salt in sufficient supply and quality. Consolidating monitoring systems, creating public demand for iodized salt and advocating for legislation on USI will also be stressed and applied to other countries as needed. To reduce iron deficiency anaemia among women, and based on assessments of its extent, control activities in the areas of education, iron supplementation, and fortification of food products will be explored.

26. In areas affected by Chernobyl in Belarus, the Russian Federation and Ukraine, UNICEF will support primary health care (PHC) models aimed at improving the quality of MCH care. Training designed to encourage the adoption of the Integrated Management of Childhood Illness (IMCI) strategy, together with "women-friendly" maternal and reproductive health care and BFHI, will be provided to health-care practitioners. Integral to both the PHC and IMCI strategies, communities will be mobilized through local authorities and NGOs to participate in planning and management of services based on an assessment of local needs and resources. In addition, opportunities to promote BPI through the provision of information to community associations and NGOs will be pursued aiming at a multisectoral approach to enhance the health and well-being of children, young people and women.

Children in need of special protection

27. The programme will advocate for national policies and services that will, firstly, prevent situations that result in children being at-risk and, secondly, protect children already in such situations. This will include socially vulnerable groups such as children in public care and those at risk of entering public care; children with disabilities; *Roma* and other minority children unable to benefit fully from many basic services; children in conflict with the law; and children affected by crime and abuse, including child-trafficking, prostitution and domestic violence. Country-specific and intercountry initiatives will include data collection, analysis and policy dialogues; legislative review; training; partnerships with media; and exchanges of experience, documentation and the dissemination of best practices. Demonstration activities that provide new approaches to national situations will be supported selectively as a means of assisting policy reforms. In Belarus, the Russian Federation and Ukraine, UNICEF collaboration will include technical and financial support for the promotion of foster care approaches and community care and rehabilitation for children with disabilities; model juvenile courts and alternative sentencing schemes for children in conflict with the law; and community outreach activities for street children which will be developed and tested by local partners, with the results reviewed with Government for wider policy consideration.

Young people's health and development

28. The programme will support advocacy for national and local policies and programmes that will respond more comprehensively to the specific needs of adolescent boys and girls, with their active participation. It will also support the promotion of healthy lifestyles and protection against HIV/AIDS, STDs and substance abuse through data collection and analysis; partnerships with media, local governments, schools and youth organizations; the development of approaches for youth-friendly services and safe spaces; and the training of service providers and youth leadership for peer group interaction. A gender-focused approach will be fostered. Special measures will be developed to target and reach at-risk groups such as young people without family support; those leaving public care institutions; and youth in detention, on the street and in families affected by poverty or minority status. In Belarus, the Russian Federation and Ukraine, national resource centres and youth coordination councils will also be supported. Joint collaboration with WHO, UNFPA and UNAIDS, as well as with other United Nations agencies, United Nations theme groups, NGOs and local governments, is considered an integral element of the programme.

Social mobilization for child rights

29. UNICEF will provide financial and technical support for a range of activities aimed at ensuring that child rights are at the fore of public and political agendas. Advocacy activities will include workshops, conferences and other forms of experience exchange towards social sector policy development and legislative reform; strengthening of national and local government mechanisms and civil society organizations for monitoring implementation of the Convention on the Rights of the Child, such as the establishment of independent ombudsmen offices as high-level protectors and promoters of children's rights and interests; and resource mobilization for children and young people through Government, the public and private sector, and other donor agencies. National and regional partnerships for children will be actively pursued utilizing celebrities, elected representatives such as mayors, and other prominent personalities through public events and the extensive network of national media. Two MONEE reports will be published and widely disseminated. The first report will feature the situation of young people; and the second will contain a decade overview of trends affecting women and children, combined with a vision for the future. In addition, situation analyses will either be prepared or updated when necessary using the framework of both Conventions.

30. Information materials linked to training for strategic groups such as journalists, television production teams, teachers, other caregivers, and NGOs, among others, on the practical elements of the two Conventions, will be further developed to enhance public awareness and stimulate local action, including that of local governments. Communication materials on specific programme themes such as healthy lifestyles, children with disabilities, better parenting and social equity for minority children will be developed or adapted to local situations and in local languages to support governmental and civil society efforts. Opportunities to encourage the participation of young people and minority groups in planning and implementing activities that address their needs through local government and civil society organizations will be advocated and supported.

Monitoring and evaluation

31. Systematic monitoring of programme implementation by the Regional Office and, in the case of Belarus, the Russian Federation and Ukraine, by the Office of the Special Representative in Moscow through periodic and annual reviews with programme partners will be undertaken. The reviews will be based on both qualitative and quantitative indicators for the global monitoring of children's rights. Partnership with ICDC and its extensive database of child indicators, as well as information specific to the programme such as the numbers of children in public care and in alternative care arrangements, will also provide quantitative data for programme review. Among other indicators to be considered are specific studies on changes in knowledge, attitudes and practices of young people about HIV/AIDS prevention and other healthy lifestyles information and children's perceptions of public care and the alternatives to be developed. Specific methods will need to be developed to monitor the programme and its impact with reference to children of minority groups. In the nine countries, programme evaluations will be conducted in the areas of children in public care and in the overall advocacy and communications strategy to assess impact and guide future activities. In Belarus, the Russian Federation and Ukraine, evaluations will be undertaken on the programme of young people's health and development and projects related to children with disabilities.

Programme management

32. Programme planning, implementation and reporting will remain primarily with the Regional Office for Central and Eastern Europe, CIS and the Baltic States and identified programme partners who are responsible for implementation. This will be facilitated by programme and technical staff at the Regional Office, which is incorporated as part of cross-sectoral costs. UNICEF will continue to work in cooperation with the registered National Committees for UNICEF, complementing efforts in advocacy and public information. UNICEF will liaise with the United Nations agencies represented in each country; and collaborate with UNAIDS, the World Bank and other bilateral donors, international and local NGOs, and academic institutions. To achieve increased cost-efficiency in its operations, the UNICEF Regional Office will continue to share common premises and services, including personnel, administration, information and communication, finance, emergency management and operations with the UNICEF Office for Europe.

33. The past two-year experience of offices in Kyiv, Minsk and Moscow showed that Regional Office support in programme design, human resources management, supply, programme and integrated budget controls is crucial to sound operations and for reducing staff costs. It also showed that the presence of the Special Representative in the three countries has given impetus to programme delivery. Experience exchange, demonstration initiatives as part of longer-term strategies for policy and programme reform, and communications for development, including building local government partnerships, are staff-intensive. This is particularly true when bringing together different partners for consensus-building related to issues affecting children. Experience has shown that there is a need to provide additional programme and operational support. Good connectivity between the three offices is crucial to the good functioning of the Programme Manager System.

34. In Belarus, the Russian Federation and Ukraine, UNICEF will continue to share premises and common services with other United Nations agencies. This will provide for improved communication and cooperation with United Nations agencies, including UNDP, UNAIDS, UNESCO, UNHCR, UNFPA, the World Bank, other donors, and local and international NGOs in programme planning, information exchange and advocacy for children's rights.